

HEPATITIS

C Collaboratively Confronting the Challenge

Thursday,
October 27, 2005

C O N F E R E N C E

THURSDAY, OCTOBER 27, 2005

**Ypsilanti Marriott at Eagle Crest
Ypsilanti, Michigan**

PRESENTED BY:

Michigan Department of Community Health
American Liver Foundation – Michigan Chapter

WITH SUPPORT FROM:

Blue Cross and Blue Shield of Michigan
Damer and Cartwright Specialty Pharmacy
Diplomat Specialty Pharmacy
GlaxoSmithKline
InterMune
Ortho-Clinical Diagnostics, a Johnson & Johnson Company
Schering-Plough

Sponsored by the Public Health Consortium

REGISTRATION INFORMATION:

Early registration deadline is Friday, October 7, 2005

Space is limited – register early!

HEPATITIS

C Collaboratively Confronting the Challenge

THURSDAY, OCTOBER 27, 2005

GENERAL INFORMATION

Conference Purpose

Hepatitis C has become the emerging issue facing health care, public health, and other health/social service agencies. This conference will provide a forum for creating a vision of how hepatitis C prevention, diagnosis, management, and treatment should be addressed in Michigan through both public and private venues.

The agenda features nationally known hepatitis experts, leaders from states that have made significant inroads in addressing hepatitis C, as well as individuals familiar with hepatitis C in Michigan. Through the conference, up-to-date information on hepatitis C will be provided, as well as information on model programs and policy initiatives. A conference of this nature has the potential to act as a springboard for future planning efforts locally and statewide.

CONFERENCE AGENDA

In addition to a keynote address and two plenary sessions, there will be three sets of six concurrent workshops. Workshops will be offered in the following tracks:

- Prevention
- Substance Abuse/Injection Drug Use
- Identification/Management/Treatment
- HIV/AIDS Co-Infection
- Special Populations
- Action and Advocacy

AUDIENCE

The conference is designed to meet the needs of the diverse constituencies with a role to play in addressing hepatitis C, including:

- Health care professionals, including physicians, physician assistants, nurse practitioners, and nurses
- Public health personnel
- Substance abuse and mental health treatment staff
- Individuals working in HIV/AIDS-related community-based agencies
- Corrections personnel
- Persons working with the homeless
- Hepatitis C advocates

GOALS AND OBJECTIVES

The following two overarching goals have been established for this conference:

- To increase participants' awareness, knowledge and skills related to hepatitis C prevention, diagnosis, management and treatment.
- To develop relationships that will facilitate the use of this awareness, knowledge and these skills in creating a comprehensive, collaborative, and culturally appropriate approach to addressing hepatitis C in Michigan.

These goals are supported by the eight participant-focused outcome objectives delineated below. Participants will be able to:

- Explain the natural history of hepatitis C disease.
- Describe the current epidemiological profile of hepatitis C at the local, state and national levels.
- Identify primary prevention strategies to prevent new cases of hepatitis C in individuals at risk.
- Delineate secondary prevention strategies to identify individuals already infected with hepatitis C, reduce their risk of disease progression, and minimize the risk of transmission to others.
- Explain current options for the diagnosis and medical management/treatment of hepatitis C and explore current research and future directions.
- Name model programs and policy initiatives, which have been implemented to effectively address hepatitis C at the primary prevention, secondary prevention, and medical management/treatment levels.
- Identify the unique needs of special populations at high-risk for hepatitis C, including those who use/abuse substances, are living with mental illness, and/or are incarcerated.
- Describe the social, cultural, economic and political forces that pose challenges to effectively addressing hepatitis C and the need to advocate for actions that will effectively address these challenges.

Featured Speakers

Mark S. Sulkowski, MD, is an Associate Professor at the John Hopkins School of Medicine and is the Director of the Viral Hepatitis Center at that institution. Dr. Sulkowski has been the principal investigator for numerous clinical trials related to hepatitis C in persons with and without HIV co-infection and is co-investigator for the John Hopkins University AIDS Clinical Trials Unit. He is widely published with articles in such peer-reviewed journals as the *Journal of the American Medical Association*, the *Journal of Infectious Diseases*, and *Hepatology*. He also speaks regularly at national conferences.

Diana L. Sylvestre, MD, is board certified in internal medicine and addiction medicine and is an assistant clinical professor in the Department of Medicine at the University of California, San Francisco. She is also the Executive Director for the O.A.S.I.S. Clinic, which provides hepatitis C treatment, as well as other medical and social/vocational rehabilitative services to medically marginalized former or current drug and alcohol users. She has been the principal investigator for numerous studies on hepatitis C treatment including treatment of those with a history of injection drug use. Dr. Sylvestre has published widely and has spoken both nationally and internationally on hepatitis C in the injection drug using population.

Laurie A. Schowalter, MPH is the Viral Hepatitis Program Manager for the National Alliance of State and Territorial AIDS Directors in Washington DC. In that capacity, she works with state and local health departments to integrate viral hepatitis services into existing public health programs. She is also actively involved in a number of national hepatitis initiatives, serving as vice chair of the National Viral Hepatitis Round Table and as a member of the Hepatitis C Appropriations Partnership.

John W. Ward, MD, is the Director of the Division of Viral Hepatitis at the Centers for Disease Control and Prevention. Prior to assuming this position, Dr. Ward served as the Editor of the Morbidity and Mortality Weekly Report (MMWR) and was Director of the Office of Scientific and Health Communications at the CDC. Dr. Ward also has 15 years experience in HIV/AIDS epidemiologic research, public health surveillance, and disease prevention. He has contributed to over 100 scientific publications, which have appeared in medical textbooks and in a variety of medical and public health journals. He is a recipient of numerous awards and commendations from CDC, the United States Public Health Service and external organizations.

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CONFERENCE AGENDA

8:00 A.M.

**Registration and Continental Breakfast
with Exhibitors**

8:30 A.M.

Welcome and Opening Remarks

*Dean Sienko, MD, Acting Chief Medical Executive
Michigan Department of Community Health*

8:45 A.M.

**Opening Keynote Address: Natural
History and Epidemiology**

*Mark S. Sulkowski, MD, Associate Professor of
Medicine, John Hopkins School of Medicine - Medical
Director, Viral Hepatitis Center*

The keynote presentation will lay the groundwork for the day by providing information on the natural history of hepatitis C including the difference between acute and chronic infection with the hepatitis C virus and the potential outcomes of chronic infection such as chronic liver disease, cirrhosis, hepatocellular carcinoma, and death. Factors that increase risk of development and progression of chronic infection will also be presented. In addition, the epidemiology of hepatitis will be discussed including prevalence and incidence of hepatitis C, major modes of transmission, and the demographic profile of the disease.

9:30 A.M.

**Plenary Session: Social, Cultural, Economic,
and Political Challenges to Addressing
Hepatitis C**

*Laurie A. Showalter, MPH, Viral Hepatitis
Program Manager, National Alliance of State
and Territorial AIDS Directors*

Hepatitis C affects people from all walks of life. However, there are populations more likely to be infected with the hepatitis C virus than others. This presentation will explore how the perceptions, attitudes, and behaviors of society-at-large towards populations at risk can impose barriers to effectively addressing this epidemic. In addition to social factors, there will be discussion of cultural, economic, and political factors that make it difficult to achieve the goals of preventing transmission and progression of this disease. Specific strategies that can be implemented to advocate for actions to address these challenges will also be delineated.

10:15 A.M.

Break in Exhibit Area

10:30 A.M.

Concurrent Workshops Group 1

1A: Prevention Track

**Voices From The Street: Health Related Needs of
Injection Drug Users in Michigan**

*Harry L. Simpson, Director of Substance Abuse Services,
Community Health Awareness Group, Point of Change*

Through this workshop, the "voices from the street" will be heard by sharing the results of two Michigan studies conducted to assess the health-related needs of individuals at risk for blood-borne infections. Specific drug using and sexual behaviors that put these populations at risk will be discussed, as well as their knowledge and utilization of strategies to reduce risk. The best avenues for dissemination of health-related messages and services will be identified. In addition, there will be discussion of the implications of study findings for the development of a continuum of hepatitis services.

1B: Substance Abuse/Injection Drug Use Track The O.A.S.I.S. (Organization to Achieve Solutions in Substance Abuse) Clinic: A Peer-Based Intervention For Substance Users with HCV

*Diana L. Sylvestre, MD, Executive Director,
O.A.S.I.S. Clinic – Assistant Clinical Professor,
University of California at San Francisco*

The O.A.S.I.S. Clinic provides hepatitis C treatment to individuals who currently abuse or have a history of abusing substances, many of whom also have psychiatric illness. In this session, the challenges of providing treatment to this population will be explored. The workshop will also provide the opportunity to “think outside the box” through the presentation of a peer-led model for providing hepatitis C-related group education, support, diagnosis and treatment. Treatment outcomes documented through studies done at the O.A.S.I.S. clinic, as well as other studies of treatment efficacy in substance abusing populations, will be shared. The implications of study results on policies, practices, and future research will be identified.

1C: Identification/Management/Treatment Track Identification and Diagnosis of HCV

*Dilip Moonka, MD, Medical Director of Liver
Transplantation, Division of Gastroenterology,
Henry Ford Health System*

Primary care professionals have a critical role to play in the identification/diagnosis of hepatitis C. It is through early identification and diagnosis that the risk of disease progression and negative health outcomes can be minimized. In this workshop, participants will learn how to determine individual risk, administer screening and confirmatory tests for infection, and accurately interpret results. They will also gain an understanding of diagnostic tests to determine viral genotype and presence/stage of liver disease and how these test results can be used to make treatment decisions and appropriate referrals.

1D: HIV/HCV Co-Infection Track HIV/HCV Co-Infection: Successfully Treating This Population

*Kay Schwebke, MD, MPH, Medical Director, Hennepin
County Medical Center Co-Infection Clinic – Assistant
Professor, University of Minnesota*

Co-infection with HIV and hepatitis C presents unique challenges. In this session, the epidemiology of the co-infected population will be described, risk factors for hepatitis C progression in co-infected individuals identified, and the impact of co-infection on HIV morbidity and mortality discussed. There will be

delineation of barriers and perceived barriers to providing HCV treatment to co-infected persons and strategies for overcoming these barriers will be explored. Finally, information on the Hennepin County Medical Center Co-Infection Clinic, a newly established clinic for the treatment of HIV and HCV co-infection, will be shared as an example of a model program.

1E: Special Populations Track Diagnosis and Treatment: An Overview for Substance Abuse and Mental Health Treatment Professionals

*Carol Salisbury, APRN, MSN, Certified Nurse
Practitioner, Ingham Regional Medical Center
Instructor, Michigan State University College of Nursing*

Substance abuse and mental health treatment professionals regularly work with populations at high risk for hepatitis C and can play a critical role in ensuring that their clients’ hepatitis-related needs are met. During this presentation, participants will be provided with information on screening tests used to determine infection with hepatitis C, diagnostic tests used to determine stage of disease, and current hepatitis C treatment. The presentation will be geared toward helping participants use this information to facilitate client understanding of test results and client decision-making about treatment options. The complex relationships between substance abuse, mental illness, and hepatitis diagnosis and treatment will also be explored.

1F: Advocacy and Action Track Living with HCV: Realities and Recommendations

Steve Deckrow, Panel Member

Lynn Allen, Panel Member

Karen Krzanowski, Panel Member

The panelists will share their experiences of living with hepatitis C including those related to accessing disease information, screening services, hepatitis C treatment, substance abuse and/or mental health services, and support groups. They will describe challenges that make it difficult for people with hepatitis C to get the services they need, share how they dealt with these challenges, and recommend to participants actions that can be taken at the organizational and community level to address these issues.

11:45 A.M.

Lunch

CONFERENCE AGENDA... continued

12:45 P.M.

Concurrent Workshops Group 2

2A: Prevention Track

Harm Reduction: Lessons Learned with HIV and Beyond

*Daniel Raymond, Hepatitis C Policy Analyst
Hepatitis C Harm Reduction Project*

Fifty to ninety percent of injection drug users are infected with the hepatitis C virus, many having become infected within the first few years of injecting drugs. This presentation will identify the potential mechanisms for viral transmission through injection drug use. Discussion will include how HIV harm reduction strategies can be used as a starting point for addressing hepatitis C but also how differences in hepatitis C transmission will require the expansion of the harm reduction repertoire. Concrete examples of harm reduction strategies implemented in New York, as well as in other venues, will be shared. There will also be exploration of the unique challenges of implementing harm reduction strategies with populations of young injectors/early initiators.

2B: Substance Abuse/Injection Drug Use Track

What Is Your Client Ready To Work On? Meeting Clients Where They Are At

*Harry L. Simpson, Director of Substance Abuse Services,
Community Health Awareness Group, Point of Change*

*David L. Petts, Jr., MA, LLP, LPC, CAC, Director,
University Substance Abuse Clinic – Faculty Member,
Physicians Assistant Program, Western Michigan
University*

Harm reduction strategies can be used to decrease risk of hepatitis C transmission, minimize other negative consequences of substance use, as well as increase the likelihood of substance abuse treatment success. The presenters will describe how the Stages of Change model can be used to assess clients' readiness to change and to select harm reduction strategies likely to be effective in working with clients at different levels of readiness. Strategies for incorporating harm reduction into interactions with clients while working in a system that advocates abstinence will be delineated along with concrete examples of how the presenters incorporated these strategies within the context of their own work.

2C: Identification/Management/Treatment Track

Treatment and Management of Hepatitis C: Part I

*Mark S. Sulkowski, MD, Associate Professor of Medicine,
Johns Hopkins University School of Medicine – Medical
Director, Viral Hepatitis Center*

Primary care professionals play a critical role in ensuring that their patients with hepatitis C get the care they need. Through this presentation, participants will learn about the current standard of care for hepatitis C, and the absolute and relative contraindications for treatment. They will also learn how to discuss with patients the pros and cons of treatment and how to effectively facilitate patient decision-making. Participants will gain information about potential side effects of treatment and how to work with patients on side-effect management. In addition, participants will become aware of how they can work to prevent progression of disease through provision of immunizations and counseling on alcohol use.

2D: HIV/HCV Co-Infection Track

More Bang For Your Buck: Integrating Hepatitis C and HIV Counseling, Testing, and Referral Services

*Amy S. Peterson, MPH, Technical Assistance
Coordinator, HIV/AIDS Prevention and Intervention
Section, Michigan Department of Community Health*

Many clients at risk for HIV are also at risk for hepatitis C. This presentation will provide rationale for integrating hepatitis C and HIV counseling, testing, and referral services. Screening questions designed to assess risk for hepatitis C will be delineated and strategies for providing hepatitis C counseling shared. Integration of this screening/counseling into existing services and challenges to this integration will be explored. Strategies for dealing with these challenges will also be outlined. In addition, participants will engage in discussion of how to assess what hepatitis-related services are available in their community as a step toward identifying and making appropriate referrals.

2E: Special Populations Track

Hepatitis C in African Americans: Unique Challenges and Opportunities

Hari Conjeevaram, MD, MS, Assistant Professor of Medicine, Section of Gastroenterology, University of Michigan Medical Center

Rosalind Andrews Worthy, President and Executive Director, Gospel Against AIDS

African Americans are more likely to have hepatitis C and more likely to have negative health outcomes if infected. During this workshop, the epidemiology of hepatitis C in African Americans will be described with a focus on the racial disparities that exist in the incidence and prevalence of this disease. There will also be discussion of differences in the natural history of hepatitis C and treatment outcomes in African Americans. African American populations at highest risk for hepatitis C and HCV/HIV co-infection will be identified and strategies for providing education and outreach to this community discussed. Finally, there will be exploration of social, cultural, and economic factors that effect access to hepatitis C services.

2F: Advocacy and Action Track

Strategic Planning Around Hepatitis C: One State's Experience

Amy Warner, MPH, Hepatitis B Coordinator, Colorado Department of Public Health and Environment

Colorado has developed a strategic plan for the development and implementation of hepatitis services in that state. One of the planning leads will share their experience including: 1) identification of constituencies that should be represented on a strategic planning committee, 2) strategies for conducting hepatitis-related needs assessment, and 3) processes used in plan development. Examples of outcomes and activities that could be included in a strategic plan will be given, as well as a description of how these outcomes/activities can be translated into action at the state and/or community level.

2:00 P.M.

Break in Exhibit Area

2:15 P.M.

Concurrent Workshops Group 3

3A: Prevention Track

Out of Site, Out of Time: Injection Drug Users and HIV/HCV Policy

Daniel Raymond, Hepatitis C Policy Analyst, Hepatitis C Harm Reduction Project

We too often expect individual level behavior change and/or organizational level change when existing laws and/or policies either do not support change or actually create barriers to change. During this workshop, policy initiatives at the state and federal level with the potential to impact hepatitis C will be described. This description will include a delineation of unique policy challenges related to hepatitis C prevention, treatment, and HIV co-infection. Concrete examples of successful hepatitis C policy initiatives implemented in other states will be shared and the roles of different stakeholders in developing these initiatives will be outlined. Finally, there will be an exploration of strategies to develop and advance successful hepatitis C policy initiatives.

3B: Substance Abuse/Injection Drug Use Track

Injection Drug Use: Overcoming Barriers to Adherence and Treatment Access

Diana L. Sylvestre, MD, Executive Director, O.A.S.I.S. Clinic – Assistant Clinical Professor, University of California at San Francisco

The majority of those with hepatitis C are current or former injection drug users. Unfortunately, many in the health care community are not prepared to provide services to this population. During this workshop, myths and misconceptions about injection drug users will be shared. There will also be discussion related to how stigma and discrimination – often based on this misinformation – can act as a barrier to care access and adherence. The role that individual providers and institutions play in perpetuating this stigma/discrimination will be explored and the ethical dilemmas this presents will be highlighted. Finally, strategies will be presented for the development and delivery of health care services that are accessible and acceptable to injection drug users.

3C: Identification/Management/Treatment Track

After Treatment: The Role of Primary Care

Stuart Gordon, MD, Director, Division of Hepatology and Hepatology Research, Henry Ford Hospital and Health System

Primary care physicians also have a critical role to play in caring for patients once they have completed hepatitis C treatment. During this workshop, participants will learn: 1) appropriate follow-up for patients who complete treatment and achieve a Sustained Viral Response (SRV), 2) appropriate follow-up for patients who do not achieve a Sustained Viral Response, and 3) options for further treatment/management of hepatitis C in patients who do not respond to treatment or who respond to treatment and then relapse. In addition, the presenter will discuss current research/trials and possible future directions for the management and treatment of hepatitis C.

CONFERENCE AGENDA... continued

3D: HIV/HCV Co-Infection Track

Integration of Viral Hepatitis Services into Prevention Programs Targeting IDUs: What Do We Know and What Should We Be Doing

Kevin O'Connor, MA, Deputy Chief, Prevention Branch, Division of Viral Hepatitis, Centers for Disease Control and Prevention

Injection drug users are at risk of infection with both hepatitis C and HIV. During this workshop, the rational for integrating hepatitis C-related services into HIV programs and other programs targeting injecting drug users will be discussed. The continuum of services that need to be integrated and processes that can be used to facilitate integration will be outlined. Integration efforts that have occurred at the national, state, and local level will be described including information about model programs. Finally, challenges to integration and potential strategies for successfully addressing these challenges will be explored.

3E: Special Populations Track

Addressing Hepatitis C in Corrections: A Corrections/Public Health/Academic Partnership

Patricia A. Voermans, MS, RN, APNP, CCHP, Health Services Coordinator, Wisconsin Department of Corrections

John R. Pfister, MS, Microbiologist/Epidemiologist, Wisconsin State Laboratory of Hygiene, University of Wisconsin at Madison

Estimates of hepatitis C prevalence rates in correctional populations range from 15 percent to 40 percent. Every year, a significant percent of those infected are released back into our communities. This session will provide information on how Wisconsin, through a corrections/public health/academic partnership, is addressing hepatitis C through the provision of services to inmates. The presenters will provide information on the epidemiological profile of hepatitis C in this population. They will describe the challenges and successes they have encountered in working together to provide cost-effective and defensible hepatitis-C related education/risk-reduction counseling, screening, and treatment in a correctional setting.

3F: Advocacy and Action Track

Working with Clients: Options for Treatment for Underinsured/Uninsured Individuals

Arlene Madrigal, MPH, Hepatology Patient Coordinator, Damer and Cartwright Specialty Pharmacy

Hepatitis C is an expensive disease to treat, but many with this disease are uninsured or underinsured. This workshop will address the scope of this problem. The different types of medical care costs associated with hepatitis C and programs that provide either full or partial coverage for these costs will be identified. Finally, how limited access to health care for those with hepatitis C negatively impacts the ability to effectively address this disease as a public health problem and possible strategies for addressing this access to care issue will be explored.

3:30 P.M.

Break in Exhibit Area

3:45 P.M.

Closing Plenary: The Future: Where Do We Go From Here?

John W. Ward, MD, Director, Division of Viral Hepatitis, Centers for Disease Control and Prevention

In closing, conference participants will be challenged to take the knowledge gained during the conference and use it to impact change. Constituencies that need to be involved in developing and implementing a continuum of hepatitis C-related services in the state and in their communities will be identified and participants will be encouraged to develop the relationships necessary to facilitate a comprehensive, collaborative, and culturally appropriate approach to addressing this disease. Specific strategies for building these collaborations will also be delineated.

4:30 P.M.

Closing Remarks

THE HEPATITIS C CONFERENCE...

For more information about the conference, contact Diane Drago at **517-663-5147** or **DMSdiane@concentric.net**

For additional copies of the registration brochure, go to **<http://www.liverfoundation.org/michigan>**

Continuing Education Credits

PHYSICIANS

The Public Health Consortium is accredited by the Michigan State Medical Society Committee on CME Accreditation to provide continuing medical education for physicians. The Public Health Consortium designates this education activity for a maximum of 6.0 Category I credits toward the AMA Physician's Recognition Award. Each physician should claim only those hours of credit that he/she actually spent in the educational activity.

FAMILY PRACTICE PHYSICIANS

This activity has been reviewed and is acceptable for up to 6.0 Prescribed credits by the American Academy of Family Physicians.

NURSES

Attendance at the conference is acceptable for 6.0 Contact Hours toward the nursing license renewal requirements of the Michigan Board of Nursing.

HEALTH EDUCATORS

The National Commission for Health Education Credentialing (NCHEC) has approved this activity for up to 6.0 continuing education contact hours (CECH).

CERTIFIED ADDICTIONS COUNSELORS

This program has been approved by the Michigan Certification Board for Addiction Professionals (MCBAP) for up to 6.0 hours for Certified Addiction Counselors (CAC), Certified Prevention Specialists/Consultants (CPS/CPC) and Certified Criminal Justice Professionals (CCJP). You must attend the entire day's session to receive credits.

CERTIFICATION OF ATTENDANCE

Certificates of attendance will be provided to participants as requested.

CONFERENCE REGISTRATION PROCEDURES

REGISTRATION FEES

Early Registration:

Registration forms received on or before October 7, 2005: \$75.00

Late Registration:

Registration forms received after October 7, 2005: \$90.00

MAIL or FAX the registration form to:

American Liver Foundation – Michigan Chapter
ATTN: Conference Registration
31700 West 12 Mile Road, Suite 201
Farmington Hills, Michigan 48334

FAX: 248-489-0376

PAYMENT

Payment may be in the form of:

- A check made payable to the American Liver Foundation
- By MasterCard, Visa, or American Express
- A purchase order
- A money order

Payment MUST be received prior to the conference.

CONFIRMATION

Confirmation letters will be sent within two weeks of receipt of registration. If you do not receive a letter contact Diane Drago at **517-663-5147** or **DMSdiane@concentric.net** to confirm registration.

CANCELLATION

Cancellations must be in writing and be received prior to October 20, 2005.

Refunds, minus a \$20.00 processing fee, will be given for cancellations on or before October 20, 2005. No refunds will be given for cancellations after this date.

Cancellation notice can be sent via FAX at **517-663-5245** or via e-mail to **DMSdiane@concentric.net**.

SCHOLARSHIPS

A limited number of scholarships covering the conference registration fee are available for individuals/agencies with limited financial resources for continuing education (i.e. community-based organizations, hepatitis C advocates). For a scholarship application form, contact Diane Drago at **517-663-5147** or **DMSdiane@concentric.net**.

OVERNIGHT ACCOMMODATIONS

A block of rooms has been reserved at the Ypsilanti Marriott at Eagle Crest for the night of October 26. The conference room rate is \$80.00 plus tax for single or double occupancy.

To obtain the conference rate, you must make your own reservations by calling the Marriott at 734-487-2000 or 800-228-9290 or by making your reservations on-line at <http://marriott.com/DTWYS> using the following promotional code: MDC MDCA. To receive the conference rate, reservations must be made by October 6, 2005.

LOCATION

The conference will be held at the Ypsilanti Marriott at Eagle Crest located at 1275 South Huron in Ypsilanti, Michigan

DRIVING DIRECTIONS

The hotel is located off I-94, exit #183 Huron Street. For a map and detailed driving directions, go to

<http://marriott.com/property/propertypage/DTWYS>

**WHEN MAKING RESERVATIONS, MENTION
"THE HEPATITIS C CONFERENCE"**

The Michigan Department of Community Health and the American Liver Foundation – Michigan Chapter. . . would like to thank the following individuals for their input into the development of the conference agenda.

Mary Adams, Michigan
Hepatitis C Foundation

Nicole Adelman, MPH, HIV/AIDS
Resource Center

Rosiland Andrews Worthy, Gospel
Against AIDS

Lyn Benjamin, Hepatitis C and Me

Shane Bies, MPH, Oakland County
Health Division

Marty Boehme, South Central
Association for Clinical Microbiology

Linda Bright, Michigan
Hepatitis C Foundation

T. Jann Caison-Sorey, MD, Blue Cross
and Blue Shield of Michigan

Patricia Clark, MPH, Michigan Department
of Community Health

Hari Conjeevaram, MD, MS,
University of Michigan

Jennifer Dale, American Liver
Foundation – Michigan Chapter

Margaret Deams, RN, Kalamazoo
Human Services

Diane Drago, Diversified
Management Services

Dan deRegnier, MS, MT (ASCP), Michigan
Society for Clinical Laboratory Sciences

Sherry Fent, Diversified
Management Services

Peter Gulick, DO, Michigan
State University

Danny Greig, MD, Michigan Academy
of Family Physicians

Marietta Hill, RN, BSN, CIC, Battle Creek
Veteran's Administration Medical Center

Liz Holcomb, RN, Community Mental
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Ingham Counties

JoAnne Hyde, RN, Kalamazoo
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Amy Murawski, Saginaw County
Health Department

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of West Michigan

David Parcell, Detroit Department
of Public Health

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Health Department

David Petts, Western Michigan University

George Pramstaller, DO, Michigan
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Linda Turner, RN, Kalamazoo
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Department of Community Health

Cathy Wilczynski, Washtenaw County
Health Department

THURSDAY, OCTOBER 27, 2005

REGISTRATION FORM

MAIL OR FAX THE REGISTRATION FORM TO:

American Liver Foundation – Michigan Chapter • ATTN: Conference Registration • 31700 West 12 Mile Road, Suite 201 • Farmington Hills, MI 48334
 FAX: 248-489-0376

FIRST NAME

LAST NAME

DEGREES

TITLE

ORGANIZATION

ADDRESS

CITY

STATE

ZIP

TELEPHONE

FAX

E-MAIL

Please check the appropriate boxes in each section below.

REGISTRATION FEES

- ☐ Early Registration: \$75.00 (Registration form received on or before October 7, 2005)
☐ Late Registration: \$90.00 (Registration form received after October 7, 2005)
☐ Complimentary registration received through the following conference sponsor: _____

PAYMENT INFORMATION

- ☐ Check # _____. Check is made payable to the American Liver Foundation – Michigan Chapter.
☐ Check will be mailed prior to the conference.
☐ Purchase order
☐ Money order
☐ I am applying for a scholarship.
☐ Credit Card: ____ VISA ____ MasterCard ____ American Express

NAME ON CARD

CARD NUMBER

EXPIRATION DATE

WORKSHOP REGISTRATION INFORMATION

Indicate the session number of the workshops you plan to attend. **Select ONE workshop in each time period.**

10:30 A.M. session: # _____ 12:45 P.M. session: # _____ 2:15 P.M. session: # _____

SPECIAL REQUIREMENTS

- ☐ I require a vegetarian lunch
☐ I have the following dietary requirements: _____
☐ I have the following physical requirements: _____

INCLUSION OF NAME IN PROGRAM BOOK

- ☐ YES, you may include my name and contact information as it appears on this form in the conference program book.
☐ No, I do not wish to have my name and contact information included in the program book.

HEPATITIS

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**THURSDAY,
OCTOBER 27, 2005**

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C O N F E R E N C E

Ypsilanti Marriott at Eagle Crest, Ypsilanti, Michigan

**PRESENTED BY: Michigan Department of Community Health
American Liver Foundation – Michigan Chapter**

Early registration deadline is Friday, October 7, 2005